

**Application Data Sheet Pursuant to 37 CFR §1.76****Inventor Information**

|                              |                       |
|------------------------------|-----------------------|
| Inventor One Given Name:     | Robert                |
| Family Name:                 | McMillen              |
| Name Suffix:                 |                       |
| Mailing Address Line One:    | 2084 Lesperance       |
| Mailing Address Line Two:    |                       |
| City:                        | Tecumseh              |
| State or Province:           | Ontario               |
| Postal or Zip Code:          | N8N 2N4               |
| City of Residence:           | Tecumseh              |
| State or Prov. Of Residence: | Ontario               |
| Country of Residence:        | Canada                |
| Citizenship Country:         | Canada                |
| <br>                         |                       |
| Inventor Two Given Name:     | Robert                |
| Family Name:                 | Colja                 |
| Name Suffix:                 | Renato                |
| Mailing Address Line One:    | 4265 Mount Sinai Cres |
| Mailing Address Line Two:    |                       |
| City:                        | Windsor               |
| State or Province:           | Ontario               |
| Postal or Zip Code:          | N9G 2G7               |
| City of Residence:           | Windsor               |
| State or Prov. Of Residence: | Ontario               |
| Country of Residence:        | Canada                |
| Citizenship Country:         | Canada                |
| <br>                         |                       |
| Inventor Three Given Name:   | Lukic                 |
| Family Name:                 | Zeljko                |
| Name Suffix:                 |                       |
| Mailing Address Line One:    | 150 Park Street West  |
| Mailing Address Line Two:    | Apt. 1316             |
| City:                        | Windsor               |
| State or Province:           | Ontario               |
| Postal or Zip Code:          | N9A 7A2               |
| City of Residence:           | Windsor               |
| State or Prov. Of Residence: | Ontario               |
| Country of Residence:        | Canada                |
| Citizenship Country:         | Canada                |

**Correspondence Information**

|                  |       |
|------------------|-------|
| Customer Number: | 29493 |
|------------------|-------|

**Application Information**

|  |  |
|--|--|
| Title Line One:  | AN AUTOMATICALLY ACTUATING<br>ERGONOMIC SUPPORT SYSTEM<br>FOR A FOLD DOWN SEAT |
| Title Line Two:  |  |
| Suggested Classification:  |  |
| Suggested Tech Center:   |  |
| Total Drawing Sheets:  | 18   |
| Suggested Drawing Figure for<br>Publication:                                   | 1  |
| Docket Number:   | 41575-208  |
| Application Type:  | UTILITY  |
| Licensed Government Agency:  | N/A  |
| Contract or Grant Numbers One:   | N/A  |
| Secrecy Order in Parent Appl.:   | N/A  |
| If plant patent appl., Latin name<br>of genus and species of plant<br>claimed: | N/A  |

**Representative Information**

|               |       |
|---------------|-------|
| Customer No.: | 29493 |
|---------------|-------|

**Domestic Priority Information**

|                         |                         |
|-------------------------|-------------------------|
| This application is a : | Continuation-in-part of |
| [continuation of]       |                         |
| Application One:        | 10/349,525              |
| Filing Date:            | January 22, 2003        |
| And :                   | Continuation-in-part of |
| Application Two:        | 10/361,475              |
| Filing Date:            | February 10, 2003       |

**Foreign Application  
Information**

|                               |     |
|-------------------------------|-----|
| Foreign Application One:      | N/A |
| Filing Date:                  | N/A |
| Country:                      | N/A |
| Priority Claimed: [Yes or No] | NO  |

**Assignee Information**

|                     |                                   |
|---------------------|-----------------------------------|
| Name of Assignee:   | L & P Property Management Company |
| Address Line One:   | 4095 Firestone Boulevard          |
| Address Line Two:   |                                   |
| City:               | South Gate                        |
| State or Province:  | California                        |
| Country:            | United States of America          |
| Postal or Zip Code: | 90280                             |